ANNUAL REPORT · 1937

NEW ENGLAND DEACONESS HOSPITAL

THE motive behind the growth of the Deaconess Hospital has been the instinct and desire to care for those sufferers who are not able to care for themselves. The need is greater today than it has ever been. Why not let skilled workers be the servants of your good will?

NEW ENGLAND DEACONESS HOSPITAL

FRANCIS W. CAPPER, *Treasurer*
16 Deaconess Road, Boston

Enclosed find $.....as my contribution toward relieving the suffering of the poor.

Name.....

Address.....

NEW ENGLAND DEACONESS HOSPITAL

ANNUAL REPORT 1937

DEACONESS GENERAL
GEORGE F. BAKER CLINIC
PALMER MEMORIAL
SCHOOL OF NURSING

DEACONESS ROAD
BOSTON, MASSACHUSETTS

TABLE OF CONTENTS

BUSINESS ADMINISTRATION

Officers of the Hospital 6
Committees 6
Trustees 7
Members of the Corporation 7
Superintendent's Report 9
Treasurer's Report 17
Funds 20
Distribution of Expense Dollar 22
Report of the Social Service Department 23

MEDICAL AND SURGICAL STAFFS

Administrative Staff 27
Deaconess General Staff 27
Palmer Memorial Staff 29
Report of the Surgeon In Chief 31
Report of the Laboratories 33
Report of the School of Nursing 37

PUBLICATIONS 40

BUSINESS ADMINISTRATION

OFFICERS OF THE HOSPITAL

1938

President

HOWARD D. BREWER — 12 East Worcester Street, Worcester, Mass.

Vice-Presidents

ALFRED H. AVERY — 19 Chestnut Street, Cambridge, Mass.
CARL S. ELL — 316 Huntington Avenue, Boston, Mass.

Treasurer

FRANCIS W. CAPPER — Boston Safe Deposit and Trust Company, Boston, Mass.

Clerk

VINCENT P. CLARKE — 27 State Street, Boston, Mass.

EXECUTIVE COMMITTEE

STANLEY O. MACMULLEN, *Chairman*
ELLIOTT P. JOSLIN, M.D., *Staff Representative*

FRANK G. ALLEN
ALFRED H. AVERY
FRANCIS V. BARSTOW
HOWARD D. BREWER
MRS. ROSCOE A. CARTER
FRANCIS W. CAPPER
PAUL F. CLARK
VINCENT P. CLARKE
CARL S. ELL
ROBERT J. ESTABROOK

FINANCE COMMITTEE

ALFRED H. AVERY
HOWARD D. BREWER
FRANCIS W. CAPPER
PAUL F. CLARK
ELLIOTT P. JOSLIN
FRANK H. LAHEY
HOWARD W. SELBY
FRANCIS R. CARNEGIE STEELE

INVESTMENT COMMITTEE

HOWARD D. BREWER
FRANCIS W. CAPPER
STANLEY O. MACMULLEN
RALPH T. SAYLES
HENRY S. ROGERSON

PHYSICAL PROPERTIES COMMITTEE

EDWARD F. MINER
CARL S. ELL

SCHOOL OF NURSING COMMITTEE

GILBERT HORRAX, M.D., *Chairman*

MRS. BLANCHE BURGESS
JOHN W. CASS, JR.
WARREN F. COOK
MISS MARY L. COOLIDGE
MISS MARJORIE B. DAVIS
MISS MABEL T. EAGER
MRS. WILLIAM L. YOUNG

BOARD OF TRUSTEES

Terms Expiring 1939

Frank G. Allen
Alfred H. Avery
Horace A. Carter
Paul F. Clark
Vincent P. Clarke
Roger I. Lee
Herbert E. Locke
Stanley O. MacMullen
Edward H. Redstone
William T. Rich

Terms Expiring 1940

Howard D. Brewer
Miss Mabel T. Eager
Edward A. Elliott
Robert J. Estabrook
Frederick A. Flood
Cornelius A. Parker
Henry S. Rogerson
Howard W. Selby
Ralph E. Thompson
Mrs. William L. Young

Terms Expiring 1941

Mrs. Roscoe A. Carter
Lawrence W. Cass
Christian A. Herter
Elliott P. Joslin
J. Franklin Knotts
Frank H. Lahey
William O. LeFavre
Matthew P. Scullin
Mrs. William L. Snow
Francis R. Carnegie Steele

Terms Expiring 1942

Francis W. Capper
Mrs. Walter G. Garritt
Mrs. Alexander G. Grant
Lewis O. Hartman
Miles C. Higgins
Edward F. Miner
Charles O. Pengra
Leland Powers
Glenwood J. Sherrard
Edward E. Whiting

Terms Expiring 1943

Mrs. Charles F. Adams
Francis V. Barstow
Carl S. Ell
Sam T. Emery
J. Franklin McElwain
Charles S. Otto
William M. Rand
Ralph T. Sayles
Mrs. Edgar N. Wrightington
Roy A. Young

MEMBERS OF THE CORPORATION

Mrs. Charles F. Adams
Frank G. Allen
William F. Anderson
John M. Arters
Alfred H. Avery
John Barnard
Maurice E. Barrett
Francis V. Barstow
William H. Bath
Mrs. W. F. Bentinck-Smith
Mrs. Charles Sumner Bird
Reginald W. Bird
Howard D. Brewer
F. Gorham Brigham
Edgar S. Brightman
William G. Brooks
Frank W. Buxton
J. L. Cairns
Arthur A. Callaghan
Duncan R. Campbell
Francis W. Capper
Horace A. Carter
Mrs. Roscoe A. Carter
William H. Carter
Lawrence W. Case
Charles A. Chadwick
Paul F. Clark
Vincent P. Clarke
John R. Copplestone
Howard W. Cowee
Guy W. Cox
George R. S. Denton
George P. Dike
Robert G. Dodge

Corporation Members Continued

Mrs. Henry M. Dunham
John Ainsworth Dunn
Miss Mabel T. Eager
Carl S. Ell
Edward A. Elliott
Sam T. Emery
Laurence W. C. Emig
Robert J. Estabrook
Lewis A. Fales
Mrs. William M. Flanders
Frederick A. Flood
Allan Forbes
W. Jesse Fowler
Carl N. Garland
Mrs. Walter G. Garritt
Francis J. Good
Mrs. John L. Grandin
Mrs. Alexander G. Grant
Charles A. Grosvenor
Lewis O. Hartman
Harley Daniel Hawver
Christian A. Herter
Miles C. Higgins
Charles C. P. Hiller
Theodore C. Hollander
Ernest G. Howes
A. Alonzo Huse
Ralph P. Jones
Elliott P. Joslin
J. Franklin Knotts
Frank H. Lahey
W. Earl Ledden
Roger I. Lee
William O. Lefavre
Herbert E. Locke
Linwood M. McKinnon
Stanley O. MacMullen
Daniel L. Marsh
Eldon H. Martin
George A. Martin
J. Franklin McElwain
Leland S. McKittrick
Edward F. Miller
Phillip I. Milliken
Edward F. Miner
Robert H. Montgomery
T. Arthur Mosley
Mrs. George S. Mumford, Jr.
Robert Lincoln O'Brien
Charles S. Otto
Briggs S. Palmer
Cornelius A. Parker
Carleton H. Parsons
Charles O. Pengra
Dwight S. Pierce
Robert M. Pierce
H. H. Plumer
Leland Powers
William P. Pritchard
William M. Rand
Edward H. Redstone
William T. Rich
Ernest W. Robinson
Henry S. Rogerson
Ralph T. Sayles
George G. Scrivener
Matthew P. Scullin
Howard W. Selby
Joseph M. Shepler
Glenwood J. Sherrard
Henry K. Sherrill
Mrs. William L. Snow
J. L. Spaulding, Jr.
E. Ray Speare
Charles E. Spencer, Jr.
F. R. Carnegie Steele
William L. Stidger
Edward C. Stone
LeRoy W. Stringfellow
George W. Taylor
Ralph E. Thompson
George L. Tobey, Jr.
Miss Clara Trowbridge
Charles W. Tucker
Irving J. Walker
Shields Warren
Parker Webb
Edward E. Whiting
Ben Ames Williams
Lawson Williams
Mrs. Edgar N. Wrightington
Roy A. Young
Mrs. William LeRoy Young

In Memoriam

Charles Wesley Burns	January 19, 1938
John A. Cousens	July 2, 1937
Daniel Fiske Jones, M.D.	September 11, 1937

REPORT OF THE SUPERINTENDENT TO THE ANNUAL MEETING OF THE CORPORATION

THE volume of work which the Hospital has done this past year is approximately 7% greater than in 1936, and is about as much as the Hospital can hope to do with its present bed capacity. There have been 7,668 in-patients, with a total of 101,579 patient days. This is an increase of nearly 6,000 patient days over last year. There were 3,556 out-patients making 11,145 visits. The Hospital has run, on an average, to 92% of its capacity. When you consider the seasonal changes, the vacation periods, the Thanksgiving recess and the Christmas recess, as well as the fact that vacant beds in one accommodation may not meet the needs of patients awaiting admission, you can understand that many times we have reached our entire capacity and have had to refuse patients desiring admission.

The bed capacity of a hospital should be at least 20% above its normal occupancy in order to care for all classes of patients, for you can see that an institution treating men as well as women, adults as well as children, ward and private patients, to say nothing of patients needing segregated treatment, requires a greater number of beds than an institution treating but one class. Most hospitals have surgical floors and medical floors entirely separate, as well as various other floors and wards set apart for particular types of patients. Almost all hospitals have their ward and private accommodations in separate quarters, but the Deaconess has wards and private rooms on the same floor, and medical and surgical patients are put side by side in the same accommodations. Often a very sick, restless, noisy, surgical patient is put alongside a medical patient who needs, above everything else, rest and sleep. There are no accommodations for the critically ill, and very inadequate accommodations for the dying, when of all times you need privacy for the relatives and friends of the patient, as well as the patient himself. These things are far from ideal, and I sometimes wonder how our patients so cheerfully accept such conditions. These conditions make the nursing and dietary problems difficult and expensive.

Furthermore, the type of service which the Hospital is called upon to render is quite different from that of the ordinary hospital. Our patients come from all sections of the country. They come because of the reputation of the doctors who serve here. They are seeking the skill of men who are widely known. They are not the usual run of medical and surgical patients of a general hospital. Our diabetic clinic is the largest in the world. We have one of the best buildings

PATIENT AT THE PALMER MEMORIAL HOSPITAL SHOWN RECEIVING DEEP THERAPY TREATMENT FOR CANCER FROM THE NEW 400,000 VOLT X-RAY MACHINE

for this work, and, as you all know, our diabetic staff is unexcelled. Our Palmer Memorial Hospital is the best equipped hospital for the care and treatment of cancer in New England. We have two grams of radium, a 400,000-volt and a new 200,000-volt treatment machine, and a staff recognized everywhere as thoroughly skilled in this work. At the Deaconess Hospital under the Lahey Clinic and others we treat complicated thyroid disorders, neurosurgery, thoracic surgery, gastric and intestinal resections, prostatic resections, as well as many complicated types of medical disorders. This lays a heavy burden upon the laboratories, the operating rooms, and the dietary and nursing services far in excess of that required in the average hospital, and calls for the best equipment and accommodations available; and yet in some respects, especially at the Deaconess Building, the accommodations are cramped, inadequate and outmoded.

Every department of the Hospital is handicapped by the lack of room. Nurses are living outside the nurses' residence. The laboratories are far separated, and the Chemical Laboratory is located in dark, inadequate quarters. The Dietary Department is not centrally located. The X-ray Departments are divided and cramped. There is no central store to serve the entire hospital. In fact, there is nowhere for anyone to expand. The problem is acute.

A new building between the Deaconess and Baker Buildings would allow us to centralize administration, laboratories, X-ray, record rooms, kitchen stores, etc. Here we could also build a new operating suite and add sufficient beds to allow us to separate our services adequately.

This is not just a dream. This should be seriously considered.

Financial

We have received and expended this past year nearly $1,000,000. The income from patients was $732,197.66, $55,000 more than in 1936.

There has been a gratifying increase in several departments. The operating room income has increased nearly $10,000 (16%) the past year. This was due to an increase in the rates for some of the longer and more complicated surgery; also, in part, to the increase in the volume of work.

Laboratory income has increased more than $5,000, due largely to an increase in outside work. X-ray and deep therapy have shown steady increases in volume and income. We expect these last two departments to show increasing gains during the ensuing year.

The expense of caring for patients during 1937 has risen nearly $75,000 over 1936. This is due principally to the increased bed capacity, requiring additional personnel, salary raises and a general increase in commodity prices. The largest increase is in our Nursing

Department, where we spent $25,500 more in 1937 than in 1936. The salaries of nurses in all of the best hospitals have been restored to 1929 levels, and it became impossible to secure good nurses without meeting this wage scale.

All departments of the Hospital reflect our high census. In the Laundry we handled 2,143,377 pieces of linen, a matter of 615 tons, 17 tons more than in the past year. In our Dietary Department we served 868,161 meals, 100,000 more than last year. In the Chemical Laboratory we made 130,326 tests, a gain of 7,000 over 1936. In the Pathological Laboratory there was almost a 16% increase in work during the year.

Steam Plant

The Steam Plant has been run this past year with practically the same efficiency as during 1936. The total cost of fuel for the year was materially higher. This was due to the increase of patient days of 6¼% and the higher average cost of oil ¼¢ per gallon.

It is perhaps worth while to review the cost to the Hospital of its heat, light, power and water, and the labor and materials chargeable to these items. For the three years of 1931, 1932 and 1933 the unit cost of the total of these items was stabilized at an average of 70.7¢ per patient day. This unit cost has gradually been decreased until in the years of 1936 and 1937 it has been 50.4¢ in each year and that with an increase of 6¼% in the patient days. This makes a drop of 20.3¢ in patient day cost. With present conditions 50¢ per patient day is the probable minimum cost of these items.

In addition, we have done many extraordinary things this year to improve the Hospital. We completed our new fire alarm system, we purchased the house at 25 Autumn Street for $10,000 and completely made it over and furnished it as an interns' residence. We bought new instruments, an operating table, and an operating light for the Palmer operating room. We refurnished the Out-Patient Department at Palmer. We had to spend over $2,500 for repairs to refrigeration and new units. We moved the switchboard out of the Deaconess Lobby into a separate room and installed a new, modern switchboard. We completely equipped the new Solution Room. The friends who gave us our 400 K V machine at Palmer gave us the money for a new 200 K V machine this fall. We spent over $6,000 in redecorating and furnishing the fifth floor of Palmer and an additional ward at the Deaconess Building, and we have redecorated many of the private rooms in the three buildings.

We received $19,484.25 from ten legacies and, in addition, $13,649.89 from trust funds established under previous bequests, and $3,000 on the annuity basis.

Friends of the Deaconess

As usual, the Friends of the Deaconess have helped us during the year. At their meetings they have made bandages of gauze, which they provided, and, in addition, they have given us a lovely rug for the Deaconess Foyer, and added to the landscaping around the buildings. They also took charge of the tea which was served on our "Open House" day, which was held in connection with the Community Federation Campaign. I feel that I can always turn to them for good advice on anything concerning the betterment of the Hospital.

There is an increasing spirit of coöperation and good-will among those who serve here, the staff, the nurses, and the employees generally.

We have already had our own private campaign among employees to secure subscriptions for the Community Federation instead of waiting for the drive to begin on the 24th of this month. The results have been most gratifying. Our quota was $2,425, and to date we have subscriptions of $2,741.32.

In talking so much of statistics and finance we must not lose sight of the main business of the hospital, the care of the patient, for everything we do is to repair and strengthen and save human life; to give little children their heritage of health and happiness; to give to mothers and fathers, courage; to give to the aged, as they face the setting sun, inspiration and hope; to preserve the fundamental relations and institutions of the community. All that we do would be useless if it did not serve a spiritual, as well as a physical, purpose.

"Strengthen ye the weak hands, and make strong the feeble knees. Say to them that are of a fearful heart, Be strong! *Fear not!* Then the eyes of the blind shall be opened, and the ears of the deaf shall be unstopped. Then shall the lame man leap for joy, and the tongue of the dumb shall sing . . . and everlasting joy shall be upon their heads."

This day is the word of the prophet fulfilled in your midst. I have seen the blind receive his sight, the lame walk, and the weak made strong; I have seen hope in the eyes of the hopeless, life given to the dying.

This is a letter received from an Episcopal minister:

"May I express to you my deep appreciation of the service of your hospital in the service they have rendered to my friend ———. It is not only the professional knowledge, but the Christian kindness and tenderness in which they have attended him. I saw such fine service last Tuesday morning at four-thirty, when the nurse had such difficult, and to me repellent duty, to perform, and yet with such gentleness, that to me it was not only human hands attending but my Christ was there. I also want to add my appreciation to the persons who have called me twice during the night to tell me of my friend's grave danger. They were most diplomatic and yet informative. I cannot imagine any service which could be more efficient."

Had we time, we could give many such illustrations of the scientific work of the Deaconess Hospital, which, combined with the kindness and consideration of the nursing staff and other personnel, make this a house of healing for all people.

STATISTICS

Deaconess Unit

Patients in house, January 1, 1937	152	
Patients admitted, 1937	4,345	
Total		4,497
Medical	1,763	
Surgical	2,582	
Male	1,708	
Female	2,637	
Private rooms	688	
Wards (including 603 semi-private)	3,657	
Patients discharged		4,355
Deaths		139
Autopsies		73
X-rays		4,198
New	2,057	
Old	2,141	
Consultations		1,247
Metabolisms		1,200
Electrocardiograms		413
Operations		3,932
Average operations per month		327.6
Total number of days service		60,464
Medical days service	18,857	
Surgical days service	41,607	
Private room days service	8,944	
Ward days service	51,520	
Daily average number of patients		165.6
Largest number treated in one day		181
Smallest number treated in one day		119
Average days stay in hospital		13.9
Average stay of ward patients		14.1
Average stay of private room patients		13.0
Hospital mortality		3.19%
Autopsy percentage		52.6%
Foot treatments		596
Alpine lamp treatments		628

Palmer Unit

Patients in house, January 1, 1937	69	
Patients admitted, 1937	2,018	
Total		2,087
Medical	977	
Surgical	1,041	

Palmer Unit (Continued)

Male	731	
Female	1,287	
Private rooms	673	
Wards (including 731 semi-private)	1,345	
Patients discharged		1,916
Deaths		118
Autopsies		67
X-rays		
Diagnostic		1,310
Deep therapy		2,056
Consultations		525
Metabolisms		187
Electrocardiograms		228
Operations		1,911
Average operations per month		159.1
Total number days service		30,514
Medical days service	8,263	
Surgical days service	22,251	
Private room days service	8,467	
Ward days service	22,047	
Daily average number of patients		83.5
Largest number treated in one day		101
Smallest number treated in one day		40
Average days stay in hospital		15.9
Average days stay in wards		17.8
Average days stay in private rooms		12.5
Hospital mortality		5.2%
Autopsy percentage		56.4%
Foot treatments		154
Alpine lamp treatments		25
Radium		145

Baker Unit

Patients in house, January 1, 1937	28	
Patients admitted, 1937	1,056	
Total		1,084
Medical	707	
Surgical	349	
Male	496	
Female	560	
Private rooms	381	
Wards (including 332 semi-private)	675	
Patients discharged		1,040
Deaths		22
Autopsies		15
X-rays		
Diagnostic		555
Deep therapy		64

Baker Unit (Continued)

Consultations		290
Metabolisms		228
Electrocardiograms		209
Operations		397
Average operations per month		33.1
Total number days service		10,601
Medical days service	4,933	
Surgical days service	5,668	
Private room days service	3,627	
Ward days service	6,974	
Daily average number of patients		29.1
Largest number treated in one day		39
Smallest number treated in one day		12
Average days stay in hospital		10.2
Average days stay in wards		10.7
Average days stay in private rooms		9.3
Hospital mortality		2%
Autopsy percentage		68.2%
Foot treatments		235
Alpine lamp treatments		31

Palmer Out-Patient Department

Number of new patients	678	
Number of old patients	1,706	
Total		2,384
Total visits		4,057
Services rendered:		
Examinations	2,119	
X-rays	340	
Deep therapy	1,439	
Radium	181	
Laboratory pathological	71	
Laboratory chemical	58	
Minor operations	96	
Total		4,304

WARREN F. COOK, *Superintendent*

REPORT OF THE TREASURER

BALANCE SHEET

DECEMBER 31, 1937

ASSETS

Current Assets:			
Cash			$ 25,311.30
Accounts Receivable		$ 55,855.94	
Less provision for uncollectible accounts		28,094.60	27,761.34
Inventories of supplies			47,605.95
Total current assets			$ 100,678.59
Investments:			
General:			
Securities and savings bank deposits (market value — $378,000.00)	$431,594.71		
Cash awaiting investment	6,878.91		
		$ 438,473.62	
Special:			
Securities and cash of F. B. and G. A. Webster Annuity Fund (market value — $8,000.00)		10,198.16	
Savings Bank deposits:			
Annuity reserve	$ 19,900.00		
Baker Clinic Maintenance Fund	16,200.00		
Smith Hamilton Fund	15,000.00	51,100.00	499,771.78
Real estate and equipment:			
Land and buildings		$2,108,188.15	
Equipment		194,102.70	
Radium		134,523.58	2,436,814.43
Deferred charges — insurance prepaid			3,825.32
			$3,041,090.12

LIABILITIES AND FUNDS

Current Liabilities:	
Accounts payable	$ 63,920.48
Accrued interest payable	5,966.41
Mortgage payments due in 1938	40,667.36
Total current liabilities	$ 110,554.25
Mortgages payable (not including $40,667.36 shown under current liabilities above)	$ 768,337.55
Restricted income unexpended	12,567.44
Endowment funds	580,791.89
Training school funds	3,256.88
Annuity reserve	22,900.00
Baker Clinic Maintenance Fund	30,683.46
Building and equipment funds	1,491,077.85
Radium funds	122,962.94
Total liabilities and funds	$3,143,132.26
Deduct deficit	102,042.14
	$3,041,090.12

STATEMENT OF INCOME AND EXPENSE

Year Ended December 31, 1937

Operating income:		
Private wards	$176,928.75	
Public wards	340,011.56	
Pharmacy	92,096.05	
Out-patient department	11,476.26	
Operating room	70,051.81	
X-ray	46,827.55	
Laboratories	54,019.55	
Deep therapy	8,775.59	
Radium	3,264.00	
Dentistry	1,236.71	
Training school	5,400.00	
Board of special nurses	13,902.25	
Public dining room	1,024.35	
Foot room	2,298.36	
Miscellaneous income	1,058.26	
Total operating income		$828,371.05
Operating expenses:		
Administration	$ 51,820.44	
Insurance	5,863.91	
Heat, light and water	52,027.03	
Maintenance and repairs	28,613.45	
Dietary	231,185.24	
Laboratories	47,294.60	
Training school	10,101.48	
Nursing care	111,503.67	
Pharmacy	92,520.99	
Laundry	25,396.06	
Housekeeping	56,749.93	
Record library	9,288.90	
Medical and surgical supplies	33,237.48	
X-ray	29,929.19	
Foot room	2,042.45	
Dentistry	1,380.89	
Social Service	4,629.49	
Radium	2,561.04	
Out-patient department	3,799.23	
Total operating expense		799,945.47
Surplus from operations — forward		$ 28,425.58

Surplus from operations — brought forward		$ 28,425.58
Add other income:		
Investment income less annuities paid	$ 16,014.86	
Income from estate prior to settlement	10,000.00	
Donations	83,666.45	
Collections on old accounts	857.25	
Baker Clinic Maintenance Fund	11,692.19	
Trustees of the Consumptives' Home	875.00	
Miscellaneous income	1,322.66	124,428.41
		$152,853.99
Deduct other expenses:		
Publicity and appeals	$ 3,450.58	
Interest expense	39,832.66	
Free treatment	66,027.64	
Provision for uncollectible accounts	18,459.40	
Attorneys' fees	2,878.63	
Extraordinary repairs and furnishings	17,380.18	
X-ray equipment	4,329.00	
Pensions	1,080.00	
Rent for house officers	1,021.50	
Commissions on collection of income from securities	677.84	
Miscellaneous non-operating expenses	649.47	155,786.90
Deficit for the year		$ 2,932.91
Deficit January 1, 1937		124,774.57
		$127,707.48
Deductions:		
Income received from an Estate resulting from payment of cumulative preferred stock dividend, principally accrued in prior years	$ 6,381.29	
Unrestricted legacies received during the year	19,284.05	25,665.34
Deficit December 31, 1937		$102,042.14

FRANCIS W. CAPPER,
Treasurer.

AUDITOR'S CERTIFICATE

NEW ENGLAND DEACONESS HOSPITAL,
Boston, Massachusetts.

We have made an examination of the balance sheet of the New England Deaconess Hospital as at December 31, 1937 and of the statement of income and expense and deficit for the year ended on that date. In connection therewith, we examined or tested accounting records of the hospital and other supporting evidence and obtained information and explanations from officers and employees of the hospital; we also made a review of the accounting methods and of the operating and income accounts for the year, but we did not make a detailed audit of the transactions.

In accordance with the previous practice of the hospital, no provision has been made for depreciation on buildings and equipment.

In our opinion, based upon our examination, the accompanying balance sheet and related statement of income and expense and deficit fairly present, in accordance with accepted principles of accounting consistently maintained by the New England Deaconess Hospital during the year under review, its position at December 31, 1937 and the results of its operations for the year then ended.

LYBRAND, ROSS BROS. & MONTGOMERY.

BOSTON, MASSACHUSETTS,
January 20, 1938.

ENDOWMENT FUNDS

DECEMBER 31, 1937

INCOME TO BE USED FOR FREE BEDS

Name	*Date*	*Amount*
Mary V. Ackley Free Bed Fund	1936	$ 3,000.00
Julia A. Babcock Free Bed Fund	1929	200.00
George William Boyd Free Bed Fund	1909	5,000.00
Abbie K. Chandler Free Bed Fund	1913	1,000.00
Mr. and Mrs. Costello C. Converse Free Bed Fund	1927	50,000.00
Fannie F. Eager Free Bed Fund	1908	5,000.00
George R. Eager Free Bed Fund	1921	5,000.00
Free Bed for Eye Patients	1931	1,525.00
Edith W. Gallagher Fund	1933	10,000.00
Ferdinand C. Gammons Fund	1934	67,575.91
Annie W. Gooding Free Bed Fund	1925	1,200.00
Lucy J. Haigh Free Bed Fund	1926	5,000.00
Mary Adeline Tobey Hastings Fund (Special Designation)	1931	24,878.19
Elijah B. and Josephine M. Hine Room	1904	3,900.00
Abbie Hills Holbrook Bed	1935	10,000.00
Ida Sinclair Holt Fund	1927	25,000.00
Dr. Joshua C. Hubbard Free Bed Fund	1917	5,000.00
S. Elizabeth Huntington Free Bed Fund	1926	5,000.00
Solomon M. Hyams Beds	1929	10,000.00
Linda May Jackson Free Bed Fund	1931	600.00
Deborah M. Josselyn Free Bed Fund	1917	346.40
Nellie Louise Kidder Free Bed Fund	1930	745.24
Kingsbury Fund for Aliens	1911	678.05
Aimee Lamb Free Bed Fund	1931	5,000.00
Flora E. MacGlauflin Free Bed Fund	1933	5,000.00
George H. Maxwell Fund	1927	10,000.00
Sarah K. Morse Fund	1928	1,758.00
Nellie S. Moulton Free Bed Fund	1931	300.00
New England Deaconess Alumnae Association Free Bed Fund	1931	10,000.00
New Hampshire Conference Free Bed Fund	1916	1,019.36
Albert N. Parlin Free Bed Fund	1930	25,000.00
Albert N. Parlin Free Bed Fund	1935	25,000.00
Abbie S. Peasley Free Service Fund	1917	475.00
Mary E. Pickering Free Bed Fund	1926	500.00
Anna M. Pickford Memorial Free Bed Fund	1927	25,000.00
Howard M. Ray Memorial Fund	1937	300.00
Mrs. Hannah R. Richards Memorial Fund	1923	1,000.00
Louise O. Twombley Fund	1937	100.00
Catherine E. Watson Free Bed Fund	1923	5,000.00
William F. Willmann Fund	1934	4,887.33
Annie W. Woolson Free Bed Fund	1920	5,000.00

INCOME TO BE USED FOR GENERAL PURPOSES

Name	*Date*	*Amount*
Ada S. Blair Fund	1926	$ 4,750.00
John and Harriet Champhrey Fund	1923	3,063.36
Clark Fund	1900	2,910.00
Chester C. Corbin Fund	1917	100,000.00
Clara L. Crawford Fund	1925	5,000.00
Francis J. Douglas Fund	1926	500.00
Roswell L. Douglass Fund	1922	2,500.00
Mary George Fund	1915	1,000.00
Sarah R. Griffin Fund	1918	7,000.00
Francis W. Hale Fund	1935	1,000.00
Charles W. Haworth Fund	1936	300.00
Margaret E. Johnston Fund	1926	2,500.00
Chaplain and Mrs. Charles A. Plumer Fund	1922	200.00
Herman and Emma Richter Fund	1929	2,301.46
Elizabeth Clarke Rogers Fund	1928	5,000.00
Georgianna B. Sargeant Fund	1935	2,000.00
Smith-Hamilton Fund	1936	42,600.00
Ella Gertrude Spalding Fund	1934	2,098.11
Sarah S. Swift Fund	1929	2,275.70

INCOME TO BE USED FOR SPECIAL PURPOSES

Name	*Date*	*Amount*
Jane G. A. Carter Orthopedic Fund	1928	$ 1,000.00
Mary E. Holt Room Fund (Furnishings)	1911	1,000.00
Sylvester Kimball Fund (Furnishings)	1923	500.00
Gallah Levi Fund (Furnishings)	1914	1,000.00
Mary DeShon Lowell Fund	1928	236.88
Fannie Kimball Morse and May Conant Morse Fund	1923	1,000.00
William L. Shearer Fund	1932	10,000.00
F. B. and G. A. Webster Fund	1923	10,198.16

OTHER FUNDS — NON-ENDOWMENT

DECEMBER 31, 1937

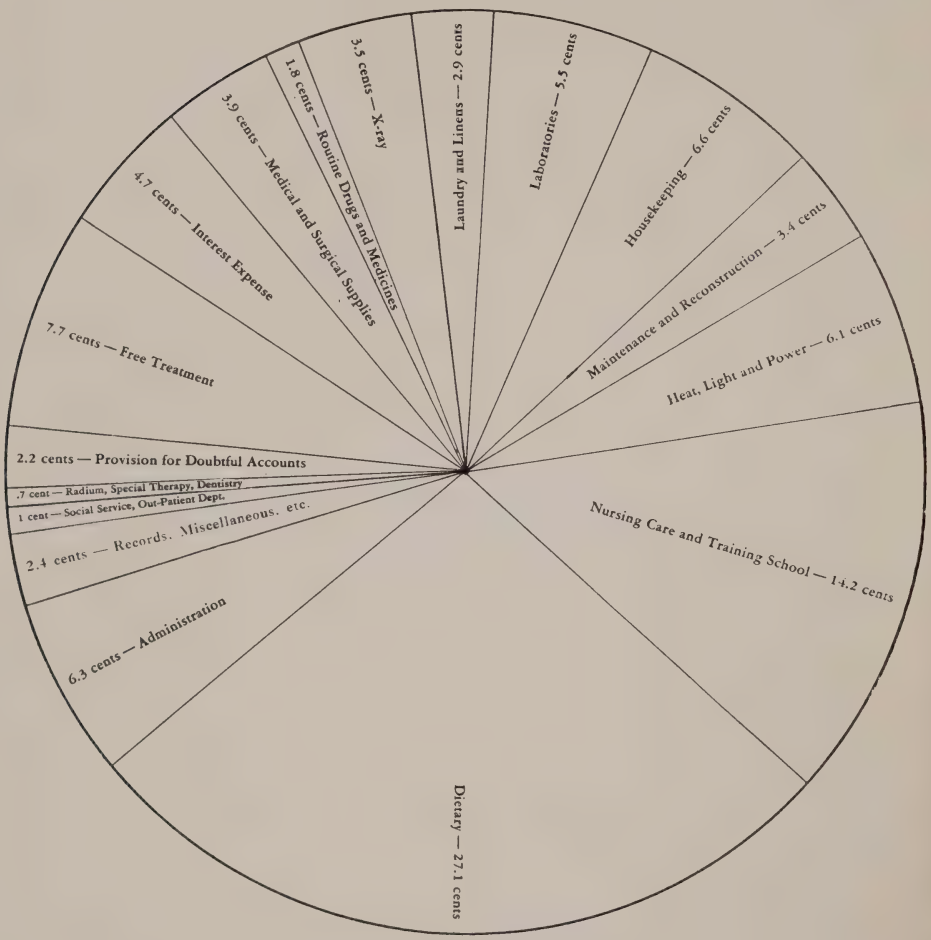
INCOME AND PRINCIPAL TO BE USED FOR SPECIAL PURPOSES

George F. Baker Clinic Guarantee Fund	1932	$30,683.46

NEW ENGLAND DEACONESS HOSPITAL

Distribution of the Expense Dollar for 1937

(Salaries included in individual expense portions)


Dietary — 27.1 cents
Nursing Care and Training School — 14.2 cents
Heat, Light and Power — 6.1 cents
Maintenance and Reconstruction — 3.4 cents
Housekeeping — 6.6 cents
Laboratories — 5.5 cents
Laundry and Linens — 2.9 cents
3.5 cents — X-ray
1.8 cents — Routine Drugs and Medicines
3.9 cents — Medical and Surgical Supplies
4.7 cents — Interest Expense
7.7 cents — Free Treatment
2.2 cents — Provision for Doubtful Accounts
.7 cent — Radium, Special Therapy, Dentistry
1 cent — Social Service, Out-Patient Dept.
2.4 cents — Records, Miscellaneous, etc.
6.3 cents — Administration

REPORT OF THE

SOCIAL SERVICE DEPARTMENT

The tendency of the medical profession at the present time is to treat the diseased individual rather than the particular manifestations of the disease. It is particularly heartening to the social service department of this hospital to find the staff here so aware of, and sensitive to, the personal and social problems of the patients, poor and rich alike. Contrary to the common notion that only the poor have troubles, we have had to spend considerable time with the financially well-to-do patients whose problems could not be solved by the simple expediency of organizing relief for material needs.

The poor we always have with us and relief has had to be organized or given directly in many cases to provide necessities for our patients. John, a 15-year-old diabetic boy who has been under the care of the hospital for many years, was readmitted seriously ill not long ago for the simple reason that he had not had enough to eat for days. We learned that his father, a barber with a steady job for many years, had recently lost it because of continued illness and the two oldest children were laid off due to the closing of the mills. To send this boy home under these conditions would surely have meant a relapse, so before discharge the interest of the Boston Family Welfare Society was obtained and they provided immediate relief. Our own fund provided the diabetic necessities and our patient was sent home on a carefully worked-out régime. In addition to giving financial relief the Welfare Society is standing by as a friendly consultant and helping the family find a way to become independent.

A Relief Fund of $1,593.60 was raised during the year for the benefit of 42 patients. The greater portion of this money was used to pay board at Prendergast Preventorium for the diabetic children given special care there, and for convalescent and nursing home care of other patients.

At Thanksgiving and Christmas through the generosity of employees of the hospital, the Friends of the Deaconess, various church groups and individuals, 30 patients and families were remembered with dinners, clothing, and presents.

A total of 364 organized outside agencies, including family welfare societies, visiting nurse associations, public welfare departments,

private homes for the aged, children's organizations, Red Cross, Travelers' Aid, character building and settlement houses, were contacted in behalf of our patients. It would be difficult, if not impossible, to carry to successful completion the health work started in this hospital without the coöperation of these organizations to whom we explain the medical and social situations of the patients and ask their help in seeing the case through. The social workers made 307 visits outside the hospital, arranged nursing home and convalescent care for 222 patients, and visiting nurse service for 118.

Eight hundred and sixty-six new patients were referred to the Social Service Department during the year. Three hundred and four old cases were also active, making a total of 1,170 patients dealt with.

The department, in dealing with 205 patients, learned of their inability to meet any part of their hospital expense. They were either definitely dependent upon welfare agencies, both public and private, or had such marginal incomes that they were living on a subsistence level. Their situation interpreted to these local welfare agencies resulted in their assuming responsibility for part, or in some cases, all of the patient's hospital expense to the amount of $20,438.21. This has not only aided the hospital but has released funds to give free care to people who would otherwise find medical expense a positive burden.

The Palmer Out-patient Department has become an attractive living room with the new comfortable maple and upholstered furniture, gay curtains and rug, that were given as a memorial to a former patient, Miss Gertrude Chase, by her relatives. Patients remark upon the contrast to the usual hospital clinic and appear to enjoy their visits in such a pleasant atmosphere. The medical follow-up done by the department has been largely in behalf of the Palmer cancer cases — 1,008 letters, telephone calls, personal visits, or consultations with local doctors or cancer clinic social workers.

Gertrude S. Jameson,
Director of Social Service.

FORM OF BEQUEST

I hereby devise and bequeath to the NEW ENGLAND DEACONESS HOSPITAL, an institution duly incorporated under the laws of the Commonwealth of Massachusetts, the

SUM OF $.....

(Here insert the amount of money bequeathed, or a description of personal or real property, or both, or if it be the residue of the estate, make that fact clear.)

FOR.....

(Here may be indicated the general work of the hospital, or any specific line of work which the hospital undertakes.)

Signed.....

Address.....

Make all checks payable to the New England Deaconess Hospital, Boston, Massachusetts

ANNUITIES

The New England Deaconess Hospital is organized and chartered to receive capital sums of money on an annuity basis on account of which they will pay to the donor an annual annuity payable quarterly during the life of the annuitant. The interest rate is necessarily based upon the age of the annuitant but is somewhat higher than the usual safe investment rate. The payment of these annuities is fully guaranteed by reserve funds. No annuitant of this hospital has ever failed to receive his interest check promptly. In these days of falling interest rates and great losses, our annuitants have felt this was their best asset.

What better investment could be made than one of this type by which the donor sees his money placed where he wishes it while still alive and also receives a safe, regular income? For details address the superintendent of the hospital, Warren F. Cook, 16 Deaconess Road, Boston, Massachusetts.

Please send me further information regarding Deaconess Hospital Annuities.

NAME.....

ADDRESS.....

.....

MEDICAL AND SURGICAL STAFFS

1938

ADMINISTRATIVE STAFF

Frank H. Lahey, M.D., *Chairman*
Shields Warren, M.D., *Secretary*

Harvard H. Crabtree, M.D.
Leland S. McKittrick, M.D.
Elliott P. Joslin, M.D.
F. Gorham Brigham, M.D.

DEACONESS DIVISION

SURGEONS

Frank H. Lahey, M.D., Surgeon in Chief

Hollis L. Albright, M.D.
Richard B. Cattell, M.D.
Howard M. Clute, M.D.
Ernest M. Daland, M.D.
Charles A. Lamb, M.D.
George A. Leland, Jr., M.D.
Halsey Beach Loder, M.D.
Charles C. Lund, M.D.
Samuel F. Marshall, M.D.
Leland S. McKittrick, M.D.
Joe Vincent Meigs, M.D.
Theodore C. Pratt, M.D.
Neil W. Swinton, M.D.
Irving J. Walker, M.D.

PHYSICIANS

F. Gorham Brigham, M.D., Physician in Chief

Frank N. Allan, M.D.
Theodore L. Badger, M.D.
Elmer C. Bartels, M.D.
William B. Breed, M.D.
Ethan Allan Brown, M.D.
Robert W. Buck, M.D.
Walter S. Burrage, M.D.
John W. Cass, Jr., M.D.
Arthur A. Cushing, M.D.
Albert A. Hornor, M.D.
Lyman H. Hoyt, M.D.
Lewis M. Hurxthal, M.D.
Sara M. Jordan, M.D.
Allen P. Joslin, M.D.
Elliott P. Joslin, M.D.
Everett D. Kiefer, M.D.
Donald S. King, M.D.
Walter A. Lane, M.D.
Roger I. Lee, M.D.
Alexander Marble, M.D.
H. Archibald Nissen, M.D.
W. Richard Ohler, M.D.
Leroy E. Parkins, M.D.
George P. Reynolds, M.D.
Howard F. Root, M.D.
Dwight L. Siscoe, M.D.
Richard P. Stetson, M.D.
William B. Stevens, M.D.
James H. Townsend, M.D.
Conrad Wesselhoeft, M.D.
Priscilla White, M.D.
S. Allen Wilkinson, M.D.

ANESTHETISTS

Urban H. Eversole, M.D.
Lincoln F. Sise, M.D.
Philip D. Woodbridge, M.D.

CARDIOLOGIST

Burton E. Hamilton, M.D.

ORAL SURGEONS

Varaztad H. Kazanjian, M.D., D.M.D. Harold A. Kent, D.M.D.
Leroy M. S. Miner, M.D., D.M.D.

DERMATOLOGISTS

Arthur M. Greenwood, M.D. C. Guy Lane, M.D.

GYNECOLOGISTS

Henry T. Hutchins, M.D. Frank A. Pemberton, M.D.

LARYNGOLOGISTS

Carl H. Ernlund, M.D. Harry J. Richter, M.D.
Walter B. Hoover, M.D. George L. Tobey, Jr., M.D.
Lyman Richards, M.D. Harold C. Tobey, M.D.
Francis L. Weille, M.D.

NEUROLOGISTS

James B. Ayer, M.D. Oscar J. Raeder, M.D.
G. Colket Caner, M.D. Theodore J. C. Von Storch, M.D.

NEUROSURGEONS

Gilbert Horrax, M.D. James L. Poppen, M.D.

OBSTETRICIAN

R. S. Titus, M.D.

OPHTHALMOLOGISTS

William P. Beetham, M.D. Louisa Paine Tingley, M.D.
J. Herbert Waite, M.D.

ORTHOPEDISTS

Z. B. Adams, M.D. Gilbert E. Haggart, M.D.
Albert H. Brewster, M.D. Mark H. Rogers, M.D.
William A. Rogers, M.D.

PATHOLOGIST

Shields Warren, M.D.

PEDIATRICIANS

Stewart H. Clifford, M.D. Warren R. Sisson, M.D.

ROENTGENOLOGISTS

Isabel K. Bogan, M.D. Hugh F. Hare, M.D.
Joseph H. Marks, M.D.

THORACIC AND GENERAL SURGEONS

Herbert D. Adams, M.D.
Richard E. Overholt, M.D.
Richard H. Sweet, M.D.

THORACIC SURGEON

John W. Strieder, M.D.

UROLOGISTS

Fletcher H. Colby, M.D.
Earl E. Ewert, M.D.
Harvard H. Crabtree, M.D.
Roger C. Graves, M.D.
George Gilbert Smith, M.D.

CHIROPODIST

J. F. Kelly, B.S.C.

PALMER MEMORIAL DIVISION

VISITING STAFF

Leland S. McKittrick, M.D.	Surgeon in Chief
F. Gorham Brigham, M.D.	Physician in Chief
Shields Warren, M.D.	Pathologist

SURGEONS

Edwards W. Herman, M.D.	Laryngologist
George A. Leland, Jr., M.D.	
George Gilbert Smith, M.D.	Urologist

PHYSICIANS

Joseph H. Marks, M.D.	Roentgenologist
Wyman Richardson, M.D.	

ASSISTANT SURGEONS

Fletcher H. Colby, M.D.	Urologist
Carl H. Ernlund, M.D.	Laryngologist
Joe Vincent Meigs, M.D.	
E. Ross Mintz, M.D.	Urologist
Leroy A. Schall, M.D.	Laryngologist
Charles L. Swan, M.D.	
Richard H. Sweet, M.D.	
John W. Spellman, M.D.	

ASSISTANT PHYSICIANS

Isabel K. Bogan, M.D.	Roentgenologist
Francis T. Hunter, M.D.	
H. Archibald Nissen, M.D.	

CONSULTANTS

Elliott P. Joslin, M.D.	Honorary Consulting Physician
Joseph C. Aub, M.D.	Medicine
Richard Dresser, M.D.	Radiology
Arthur M. Greenwood, M.D.	Dermatology
Burton E. Hamilton, M.D.	Cardiology
John S. Hodgson, M.D.	Neurological Surgery
Varaztad H. Kazanjian, M.D., D.M.D.	Oral Surgery
W. Jason Mixter, M.D.	Neurological Surgery
Richard H. Norton, Jr., D.M.D.	Oral Surgery
Ethel M. Rockwood, M.D.	Dermatology
William A. Rogers, M.D.	Orthopedic Surgery
Channing C. Simmons, M.D.	Surgery
Henry R. Viets, M.D.	Neurology
J. Herbert Waite, M.D.	Ophthalmology

ASSOCIATE STAFF

Thomas J. Anglem, M.D.
John W. Cass, Jr., M.D.
Howard M. Clute, M.D.
Ernest M. Daland, M.D.
Clifford C. Franseen, M.D.
Roger C. Graves, M.D.
E. Parker Hayden, M.D.
Albert A. Hornor, M.D.
Lyman H. Hoyt, M.D.
Henry Jackson, Jr., M.D.
Frank H. Lahey, M.D.
Charles C. Lund, M.D.
John W. Meachen, M.D.
Leroy E. Parkins, M.D.
Langdon Parsons, M.D.
Frank A. Pemberton, M.D.
Howard F. Root, M.D.
William M. Shedden, M.D.
Dwight L. Siscoe, M.D.
Jack Spencer, M.D.
Richard P. Stetson, M.D.
Grantley W. Taylor, M.D.
Irving J. Walker, M.D.

ASSISTANT PHYSICIANS TO OUT PATIENTS

Milton H. Clifford, M.D.
Earl R. Lehnherr, M.D.
George P. Sturgis, M.D.

REPORT OF THE SURGEON IN CHIEF

In the report of last year, attention was directed toward the pressing need for more adequate operating room facilities in the Deaconess Hospital building itself. Not only are the present operating rooms inadequate in number, but they are also distinctly inadequate in that they lack many of the facilities which go with modern operating rooms.

Each year it has been my purpose to speak of some of the newer developments, and one of which the hospital can well be proud is the development of a small School of Anesthesia. There are now being taken three or four physicians who study for a period of two years, during which time they are thoroughly trained in all of the newer developments in anesthesia.

It is of interest, as evidence of the changing trends in anesthesia, to note that last year in the Clinic 7,447 anesthesias were given, but that of this number only 336 were primarily ether. It was but a few years ago when practically every anesthetic given in the Deaconess Hospital was ether. When it is realized that some of the newer anesthetics not only make the operation easier for the surgeon to do but also make it very much easier for the patient to endure the anesthesia by eliminating vomiting, headache and many of the undesirable postoperative complications, then it is appreciated that there are real advances in anesthesia.

These doctors when trained in anesthesia are being placed in various parts of the country as heads of the departments of anesthesia in hospitals, and they spread over their communities the advances in anesthesia. It is obvious then that the Deaconess Hospital is playing a large part in elevating the standard of this branch of medicine.

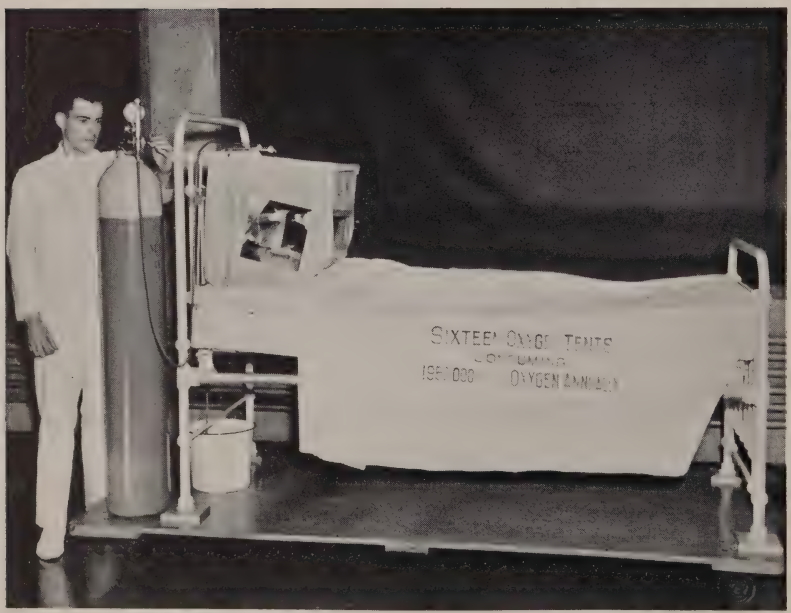
It should also be of interest to the friends of the hospital that young men are being trained also in the various branches of medicine and surgery and placed over the country where they are able to employ some of the newer developments arising in this hospital.

Visiting doctors still come from all parts of the United States and foreign countries to observe the work in the New England Deaconess Hospital, the George F. Baker Clinic and the Palmer Memorial Hospital, and as stated in last year's report, I believe that there is no hospital of a corresponding size in this country that is playing a greater part in informal postgraduate teaching than is the New England Deaconess Hospital and its associated branches.

The hospital in the death of Dr. Daniel Fiske Jones has lost one of the most valued members of its staff, and the staff one of its longest and most valued friends.

Dr. Daniel Fiske Jones was an outstanding man and an internationally famous surgeon. His interest in the New England Deaconess Hospital dated from his earliest assistantship days with Dr. Maurice H. Richardson and throughout his life this interest never waned. He was particularly interested in problems related to cancer, and through this interest and influence a great deal that is now being accomplished at the Palmer Memorial Hospital was made possible. His attractive presence and sound judgment will be greatly missed by everyone.

FRANK H. LAHEY,
Surgeon in Chief.



MODERN OXYGEN THERAPY APPARATUS SERVICED BY FULL-TIME TECHNICIANS

REPORT OF THE LABORATORIES

I. Research Laboratories

The laboratories on the second floor of the George F. Baker Clinic for chronic disease have been active. Dr. Alexander Marble is continuing his work on the susceptibility of diabetic patients to infection, on the enlargement of the liver in some diabetic children, study of the iron metabolism in hemochromatosis. In general, he is endeavoring to bridge the gap that exists in our knowledge between experimental diabetes in animals and the disease in man.

The work of Mr. Harold J. Perkin, under the auspices of the Lahey Clinic, has continued to yield interesting and valuable results in knowledge of iodine metabolism in relation to thyroid disease. In addition, Mr. Perkin has been carrying out a number of biologic tests with relation to various of the ductless glands.

Further progress has been made on a device for the measurement of energy from radium and X-rays of various types through the coöperation of Dr. J. Cramer Hudson, of the Department of Biophysics at Harvard University, and Mr. Cowing, radium technician. A very useful phase of their work has been a series of measurements of the new types of X-ray apparatus now installed at the Palmer Memorial Hospital.

During the year a second edition of the monograph "The Pathology of Diabetes Mellitus" has been prepared.

The major share of research, which unfortunately has to be entirely financed from outside sources, is concerned largely with advancement of our knowledge of the effect of X-ray and radium on living tissue. Owing to the fact that in Boston practically every type of radiation is available and owing to the willing coöperation of the various hospitals, it has been possible to carry out experimentation over a greater range of wave-lengths of radiation here than in any other American city.

The methods developed by Dr. Alfred Marshak for determining the effect of radiation on cells are giving important information not only on the efficacy of radiation therapy but also are providing an important lead toward the mechanism of cell division, understanding of which is necessarily fundamental not only to the cancer problem but to the problem of growth as well.

Dr. Lloyd C. Fogg has completed his comparative study of the effects of radiation on the detailed cytoplasmic structure of malig-

TECHNICIAN SHOWN MAKING UP AN INTRAVENOUS SOLUTION. ABOUT 45 SOLUTIONS ARE MADE UP HERE DAILY FOR USE EITHER BEFORE OR AFTER OPERATIONS

nant cells. This work has been of material value in advancing our knowledge.

I must include our sincere thanks to Dr. Joseph H. Marks, radiologist of the hospital, for his wholehearted coöperation in our experimental work.

Dr. Gates is continuing her investigation of the means by which secondary deposits, or metastases, of cancer become established.

I wish once more to recommend that an appropriation for research be made in future laboratory budgets. Every year the laboratory has more than paid for itself financially.

II. Chemical Laboratory

Last year we thought the peak had been reached in the work of the Chemical Laboratory. The value of the laboratory to patients and physicians alike is so great, however, that there was a still further increase. A total of 130,326 chemical tests were performed, an increase of 6 per cent. Of these, over 53,000 were examinations of the blood, which are time-consuming. This volume of work could not be handled in the cramped quarters available were it not for the energy and intense interest in their work of all the technicians.

Miss Hunt has continued to oversee this large amount of work without sacrificing accuracy or promptness.

Dr. Nellie Halliday joined the laboratory staff this fall as assistant to Miss Hunt and is, in addition, carrying out a valuable series of observations on the liver changes in diabetic patients.

III. Pathological Laboratory

The work of this laboratory has again increased. A total of 8,563 examinations were made, an increase of 21 per cent.

In keeping with our policy with regard to this laboratory as a training field for pathologists, we have had a considerable number of shifts in personnel. Dr. E. B. Helwig is continuing as assistant pathologist, much to the satisfaction of the laboratory group and staff. Dr. C. E. Brown has left to take charge of the laboratories at Santa Barbara, California. Dr. F. G. Medinger has become assistant in the Division of Adult Hygiene concerned with the development of the Massachusetts cancer control program. Dr. K. B. Lawrence is resident in surgery at the Massachusetts Memorial Hospital.

The present staff is: Dr. E. B. Helwig, assistant pathologist, Dr. Charles E. Dunlap, Littauer Fellow, Dr. Donald G. Henderson, resident, and Dr. Kenneth B. Jacques, assistant resident.

Shields Warren,
Pathologist.

CANDLE CEREMONY AT WHICH FIRST-YEAR NURSES RECEIVE THEIR CAPS AND BECOME MEMBERS OF THE SCHOOL OF NURSING

REPORT OF THE SCHOOL OF NURSING

It is once again my privilege to present the report of the School of Nursing for the year 1937.

We think that we have made considerable progress this past year in bringing about certain changes which we trust will mean better prepared nurses at the end of their three-year experience. It was necessary to make these changes to keep this school abreast of certain specified requirements which, if met satisfactorily, will include us in the group of "better" nursing schools.

The orientation period arranged for new students has been of great assistance in bridging the gap between home and security and the big world of uncertainty. The president of the senior class sent a personal invitation to the incoming students and their friends and families to be present at a tea in their honor on the afternoon of registration day. This gave us an opportunity to welcome them and to become a little acquainted with the student and her background. The students and their parents had an equal opportunity to meet those who will be charged with the direction of their study and experience. A special program is arranged including talks by the school physician, the house mother and others; classes in forming good study habits and the taking of usable lecture notes; reviews in everyday arithmetic — all of which is preparation for their work here and at the college. The reaction of the new groups to the school has been most cordial and interesting to watch.

We have exercised more care in the selection of students. The aptitude and scholastic ability tests have proven quite helpful. As a result, the last three groups of students have done better work at the college, in their classes here, and in their practical work on the floors.

The curriculum has been changed in several respects. A full thirty-hour course in psychology is now included with the other subjects at Simmons College. Members of the Alumnae Association have given several lectures to the students on the specialties they represent. This procedure is always stimulating since the student tends to project herself into the shoes of the successful person.

Comprehensive examinations have been found to help markedly in the correlation of class instruction and ward experience. Bedside clinical instruction is being carried on with the help of the medical staff.

SENIOR STUDENTS ENTERTAIN ON REGISTRATION DAY IN HONOR OF THE NEW CLASS

Twelve supervisors and head nurses who share the major burden of instruction have formed an instructors group to discuss changes, formulate plans and share experiences relating to the student body.

The school health record is enviable. Dr. Cass has been of inestimable value not only as physician to the school but as an ever ready source of encouragement and advice. The new infirmary, a large redecorated and refurnished room in Harris Hall, is most pleasant and adequate and the infirmary nurse, with her understanding attitude and broad shoulders to weep upon, is a cure for lonesomeness and an opportunity for sympathy.

The informal weekly teas have been continued and have been made more pleasant by gifts of a silver plate from the class of 1937, five dozen cups and plates from the class of 1936, and five dozen silver spoons from the senior and junior staffs.

The graduation festivities were held in May, at which time forty-four nurses received their diplomas. Dr. Halford E. Luccock, of Yale University Divinity School, gave the principal address and Dr. Priscilla White gave the charge to the class.

Three nurses, graduates of other schools, have come here for eight weeks' experience and teaching in the care of the diabetic patient. Through friends of Dr. Joslin's who have made a scholarship available, it is now possible for us to offer to carefully selected, registered nurses a twelve-week, well-rounded course in the care and instruction of the diabetic patient. Through these young women, the gospel of the modern treatment of diabetes may be advanced.

The student nurse is an eager, enthusiastic, willing, wholesome young woman, too young, when she comes to us, and I believe that it is a most important part of the hospital program to see that she is protected and developed into a good nurse and a useful citizen. We must be particular in our expectations but, from the economic standpoint alone, the hospital should realize the value of her contribution in service and her goodwill. I trust that more attention will be given to making possible more of a school life so that she will have a vent for the pent up emotions of youth, which must necessarily be curbed while on the floors of the hospital.

Indeed, I count it a rare privilege to be in a position to meet face to face the young woman of today who chooses nursing. No doubt those of us who are older thought we were rather exceptional young women in our student days but now, with more careful selection, we begin with a much better prepared, a better all-round individual. Recently we have noticed that the post-war restlessness is not reflected quite as much in their attitude toward life and direction and they are a serious but a happy, healthy and stimulating group.

Marjorie B. Davis,
Superintendent of Nurses.

PUBLICATIONS AND ADDRESSES

By Staff Members and Their Associates

1937

ADAMS, Herbert D.

Publications

"Regional ileitis." S. Clin. North America, Lahey Clinic Number, June, 1937, p. 763.
"The clinical value of morphine and pituitary extract, pitressin, in abdominal surgery." *Ibid.*, p. 773.

ADAMS, Z. B.

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——— and J. J. Decker
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